

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------------|-----------------|
| | <i>[Signature]</i> | | <i>02/17/00</i> |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>DB</i> | <i>65373</i> | <i>04/17/00</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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Best Available Copy

If more than 150 claims or 10 actions
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